



State of Maine

Department of Health & Human Services (DHHS)

MaineCare

Medicaid Management Information Systems
Maine Integrated Health Management Solution
Provider Quick Reference

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1. Introduction

The Provider Quick Reference (PQR) is a guide that can be used in a virtual (paperless) format. It is located on the MIHMS HealthPAS Online Portal located in the Provider section. This guide will allow Providers to easily find basic information and resources in another central location on the portal.

This document will be maintained and links will be updated as changes occur so the most recent information is available to Providers.

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2. Trading Partner Links

Some information is located on the secured site of the MIHMS HealthPAS Online Portal and you must be a registered Trading Partner to access that site. To access any of these particular documents or references, make sure you:

1. Sign up for a Trading Partner if you have not registered. For more information on how to become a Trading Partner, visit the step-by step Trading Partner Guide instructions on the online portal located at <https://mainecare.maine.gov/Default.aspx>. Click on the Provider Tab and then select Trading Partner Guides link located on the left hand side of the screen beneath the heading Provider Documents.
2. If you are already registered as a Trading Partner, go to the Trading Partner tab on the online portal and log in.

Provider Quick Reference

2.1 *Get Adobe Reader*

[Free Adobe Reader](#)

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2.2 *Provider Enrollment Guides*

[for In-State Individual Providers](#)

[for In-State Provider Groups](#)

[for In-State Facilities, Agencies, and Organizations](#)

[for Out-of-State Providers](#)

[for Non-Medicaid Providers](#)

[Provider Maintenance User Guide \(for Enrollment information\)](#)

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2.3 *Trading Partner Guides*

[for Billing Providers](#)

[for Billing Agents](#)

[for Clearinghouses](#)

[for Health Plans](#)

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2.4 *Forms*

[Prior Authorization Request](#)

[Prior Authorization Cover Sheet](#)

[Referral Request](#)

[McKesson Criteria Sheets](#)

(must be a Trading Partner and must be first **logged in** to access this information)

Claim Attachments

Information on Claim Attachments is found within the respective Billing Guides:

[Professional/CMS1500](#)

[Institutional/UB04](#)

[Dental/ADA2006](#)

DHHS Sterilization Requests

[Hysterectomy](#)

[Tubal Ligation](#)

[Vasectomy](#)

[Abortion Certification](#)

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2.5 *Reports*

SEED Budget and Spend

Your SEED budget and spend is presented on your RAs (Remittance Advices).

To obtain further information or clarification, contact Network Services at 1-207-287-4827

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2.5 Reports

PCCM Payment Report

To obtain a report or further information by telephone, contact Network Services at 1-207-287-4827

PCCM Patient Roster (must be a trading partner and logged in to access information)

To obtain a report by telephone, contact Network Services at 1-207-287-4827. In addition, you may generate current Patient Rosters online when logged in as a Trading Partner. See the HealthPAS Online: [Patient Roster User Guide](#) for detailed instructions.

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2.6 MaineCare Claims & Billing

Reimbursement Methodologies and Maximum Fee Limits

[Procedure Code Lookup](#) (available using Direct Data Entry “DDE” functionality)

[Fee Schedule](#) (also includes MaineCare Rates by Policy Section)

[Exhaustive List of Codes/Fees](#) (see Ch. III – Allowances for Services)

[Methodology](#) (see Ch. 1.08 – Reimbursement and Ch. 1.11 – Payment Process)

[Claims Submission \(CMS1500, UB04, and Dental\)](#)

[EDI \(Electronic Data Interchange\) Companion Guides for 5010](#)

[MeCMS to MIHMS Transition Guide](#)

[Claims Denial Reasons and Billing Errors](#)

Claims Status (refer to Status section within these Submission and Status User Guides)

[Professional](#)

[Institutional](#)

[Dental](#)

[Prior Authorizations Manual](#) (a complete How-To guide for Prior Authorizations)

[Referrals How-To](#)

Note: Full instructions are found on the Referral form itself on page 2.
Click on the Referral How-To link above to access the Referral Form with its instructions.

[Fraud and Abuse / False Claims Act](#)

[Appeals](#)

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2.7 MaineCare Member

[MaineCare Member Handbook](#)

[MaineCare Covered Services and Limitations](#)

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2.8 MaineCare Policy

The purpose of the links provided below is to enable you to navigate to the Department of Health and Human Services (DHHS) policy manual. Providers will need to become familiar with all aspects of Chapter 1 Policy. Particular sections of the policy have been listed below under the subject matter column. However, in directing you to a particular section, you are not relieved of your obligation to comply with all aspects of the policy.

Subject Matter	Link
Member Rights and Responsibilities See Ch. 1.04 Member Participation and Ch 1.05 Supplementation By Members	Chapter 101, MaineCare Benefits Manual, Ch. I General Administrative Policies and Procedures
Provider Rights and Responsibilities See Ch. 1.03 Provider Participation	Chapter 101, MaineCare Benefits Manual, Ch. I General Administrative Policies and Procedures
Exhaustive List	Chapter 101, MaineCare Benefits Manual, Ch. I General Administrative Policies and Procedures
Methodology See Ch. 1.08 Reimbursement and Ch. 1.11 Payment Process	Chapter 101, MaineCare Benefits Manual, Ch. I General Administrative Policies and Procedures
Coordination of Benefits See Ch. 1.07 Third Party Liability	Chapter 101, MaineCare Benefits Manual, Ch. I General Administrative Policies and Procedures
Appeals See Ch 1.21 Provider Appeals	Chapter 101, MaineCare Benefits Manual, Ch. I General Administrative Policies and Procedures

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2.9 *Contact Information*

[Useful Contacts](#)

If you have any questions or problems with the links or retrieving any information in this Provider Quick Reference, contact Provider Services at 1-866-690-5585 or email MaineCareProvider@molinahealthcare.com.

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